

FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>4398</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>Wayne</u> <u>LeGette</u> P.O. Box, Bldg., Room No., if any <u>c/o Actors' Equity Assn.</u> Street <u>165 W 46th Street</u> City <u>New York</u> State <u>New York</u> ZIP Code + 4 <u>10036</u>	4. Name, file number, and address of labor organization. Name <u>Actors' Equity Association</u> Labor Organization File Number <u>006-029</u> P.O. Box, Building and Room Number, if any Street <u>165 W 46th Street</u> City <u>New York</u> State <u>New York</u> ZIP Code + 4 <u>10036</u>
5. Position in labor organization. <u>Eastern Region National Councillor</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name <u>Ellen Richard</u> Trade Name, if any: <u>ASSISSINS, Roundabout Theatre Co.</u> P.O. Box, Bldg., Room No., if any <u>1200</u> Street <u>231 West 39th Street</u> City <u>New York</u> State <u>New York</u> ZIP Code + 4 <u>10018</u>	7.a. Nature of Interest, Transaction, or Income. <u>In my capacity as a Tony Voter for the annual Tony Awards, I received two tickets to this show. The producer was obligated to provide these tickets by the American Theatre Wing, the non-profit organization that oversees the awards.</u> 7.b. Amount. <u>\$200</u>

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)	
Signed <u>Wayne LeGette</u>	On <u>7-26-05</u> <u>212-869-8530</u> Date Telephone Number

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4

9. Business deals with:

☐ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4

11.a. Nature of such dealing.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

12.b. Amount.

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4

14.a. Nature of payment.

13.b. Is the Business an Employer ☐ or Consultant ☐ ?

14.b. Amount of payment.

Name of Person Filing <u>Wayne LeGette</u>	File Number U-
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Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name if any). Name <u>BEN GANNON</u> Trade Name, if any: <u>THE BOY FROM OZ Co ALBERT POLAND</u> P.O. Box, Bldg., Room No., if any <u>311 W. 43 203</u> Street <u>311 W. 43 ST.</u> City <u>NY</u> State <u>NY</u> ZIP Code + 4 <u>10036</u>	7.a. Nature of Interest, Transaction, or Income. In my capacity as a Tony Voter for the annual Tony Awards, I received two tickets to this show. The producer was obligated to provide these tickets by the American Theatre Wing, the non-profit organization that oversees the awards. <hr/> 7.b. Amount. <div style="border: 1px solid black; padding: 10px; text-align: center; width: 150px; margin: 0 auto;">250.50</div>

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name if any). Name <u>JAMES M. NEDERLANDER</u> Trade Name, if any: <u>FIDDER/Nederlander Prod. Co.</u> P.O. Box, Bldg., Room No., if any Street <u>1450 B'way 6th FL</u> City <u>NY</u> State <u>NY</u> ZIP Code + 4 <u>10018</u>	7.a. Nature of Interest, Transaction, or Income. In my capacity as a Tony Voter for the annual Tony Awards, I received two tickets to this show. The producer was obligated to provide these tickets by the American Theatre Wing, the non-profit organization that oversees the awards. <hr/> 7.b. Amount. <div style="border: 1px solid black; padding: 10px; text-align: center; width: 150px; margin: 0 auto;">250.50</div>

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6. Name and address of Employer (including trade name if any). Name <u>MICHAEL REGO</u> Trade Name, if any: <u>MATCH/ Araca Group</u> P.O. Box, Bldg., Room No., if any <u>501</u> Street <u>260 W. 44 ST.</u> City <u>NY</u> State <u>NY</u> ZIP Code + 4 <u>10036</u>	7.a. Nature of Interest, Transaction, or Income. In my capacity as a Tony Voter for the annual Tony Awards, I received two tickets to this show. The producer was obligated to provide these tickets by the American Theatre Wing, the non-profit organization that oversees the awards. <hr/> 7.b. Amount. <div style="border: 1px solid black; padding: 10px; text-align: center; width: 150px; margin: 0 auto;">250.50</div>

Name of Person Filing Wayne LeGette

File Number U-

Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name if any).

Name ~~SLY FOX~~ BEN SPRECHER

Trade Name, if any: SLY FOX / Sprecher Org.

P.O. Box, Bldg., Room No., if any

Street 257 W. 52 ST. 5th Floor

City NY

State NY ZIP Code + 4 10019

7.a. Nature of Interest, Transaction, or Income.

In my capacity as a Tony Voter for the annual Tony Awards, I received two tickets to this show. The producer was obligated to provide these tickets by the American Theatre Wing, the non-profit organization that oversees the awards.

7.b. Amount.

200.00

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name if any).

Name DAVID STONE

Trade Name, if any: WICKED / 321 mgmt.

P.O. Box, Bldg., Room No., if any Suite 801

Street 321 W 4th ST.

City NY

State NY ZIP Code + 4 10036

7.a. Nature of Interest, Transaction, or Income.

In my capacity as a Tony Voter for the annual Tony Awards, I received two tickets to this show. The producer was obligated to provide these tickets by the American Theatre Wing, the non-profit organization that oversees the awards.

7.b. Amount.

200.00

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6. Name and address of Employer (including trade name if any).

Name ROGER BERLUND

Trade Name, if any: WONDERFUL TOWN

P.O. Box, Bldg., Room No., if any

Street 10 EAST 53 ST. 30 FL

City NY

State NY ZIP Code + 4 10022

7.a. Nature of Interest, Transaction, or Income.

In my capacity as a Tony Voter for the annual Tony Awards, I received two tickets to this show. The producer was obligated to provide these tickets by the American Theatre Wing, the non-profit organization that oversees the awards.

7.b. Amount.

200.00

Name of Person Filing Wayne LeGette	File Number U-
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Part A Continuation Page

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<p>6. Name and address of Employer (including trade name if any).</p> <p>Name KEVIN McCOLLUM</p> <p>Trade Name, if any: AVENUE Q / The Producing Off.</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street 145 WEST. 45 ST.</p> <p>City NY</p> <p>State NY ZIP Code + 4 10036</p>	<p>7.a. Nature of Interest, Transaction, or Income.</p> <p>In my capacity as a Tony Voter for the annual Tony Awards, I received two tickets to this show. The producer was obligated to provide these tickets by the American Theatre Wing, the non-profit organization that oversees the awards.</p> <p>7.b. Amount.</p> <p align="center">200.00</p>

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